FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response: 0.								

Ownership (Instr. 4)

mstruc	alon 1(b).			Fileu	or Sec	ction 3	0(h) of the In	or trie Si ivestmei	nt Cor	npany Act of	1940	134					
Name and Address of Reporting Person*     Gerstberger Peter C.				2. Issuer Name and Ticker or Trading Symbol Honest Company, Inc. [ HNST ]							heck all app Direc	licable)	r 10%		O Issuer Owner r (specify		
(Last) (First) (Middle) 12130 MILLENNIUM DRIVE SUITE 500				3. Date of Earliest Transaction (Month/Day/Year) 10/20/2021						below) below)  Chief Digital & Strat. Officer							
(Street) LOS ANGEL			0094 Zip)		4. If A	mendr	ment, Date o	f Origina	l Filed	d (Month/Day	//Year)	6. Lir	X Form	filed by On	e Reporti	ng Perso	on
		Table	I - Non-I	Deriva	tive S	ecur	ities Acq	uired,	Dis	posed of,	or Ben	efici	ally Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)			Execution Date,				es Acquired (A) Of (D) (Instr. 3,		4 and Securities Beneficially Owned Following		Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount	(A) or (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)				
Common	Stock (RSI	IJs)		10/20/2	2021			A		362,395	A	\$0	36	362,395 D			
		Tal					ies Acqui varrants,							d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transac Code (li 8)		of	6. Date Expirati (Month/	on Da		7. Title an Amount of Securities Underlyin Derivative Security ( 3 and 4)	of G G	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dir or (I)	nership	11. Nature of Indirect Beneficial Ownershij (Instr. 4)

**Explanation of Responses:** 

Remarks:

Brendan Sheehey, Attorney-

Amount or Number

Shares

Title

in-Fact

Expiration Date

\*\* Signature of Reporting Person Date

10/22/2021

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

and 5)

(A) (D) Date

Exercisable